

The Victorian Association for Gifted and Talented Children



STUDENT AND PARENT/GUARDIAN CONSENT FOR ELECTRONIC RECORDING &/OR PUBLISHING

Name of School or College _____
Name of Student _____
Year Level _____
Name of Teacher Requesting
Permission _____
Date _____

The work of the above named student is being sought for publication in the Victorian Association for Gifted and Talented Children's VISION magazine that is published by VAGTC twice yearly.

Type of work (e.g. artwork, photograph, school project, poem, article, blog, podcast, video or digital story)

Dear

Your work has been selected to be used as a resource by the Victorian Association for Gifted and Talented Children. It may be used at conferences, in printed and electronic publications, including the internet or video for educational purposes. If you agree to do this, the work will appear with your first name only.

This consent is for an indefinite period of time. Permission is being requested to publish, reproduce and communicate the above on:

- Public websites of the Victorian Association for Gifted and Talented Children's (VAGTC) website (www.VAGTC.org.au) and other VAGTC social media outlets
- VAGTC publications including the VISION magazine and promotional material published in print and electronically including on the VAGTC's websites.

Please advise whether your work identifies a living person (other than you) and if so, how your teacher/the VAGTC can contact that person to obtain their consent for your work to be published

Parents should be aware that when information is published on public websites and social media channels, it can be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information. Published information can also be linked to by third parties.

The Victorian Association for Gifted and Talented Children



STUDENT AND PARENT/GUARDIAN CONSENT

I, _____
(Full name of student)

give permission to the State of Victoria (Department of Education and Training) to publish, reproduce and communicate my

- | | | |
|---|---|--|
| <input type="checkbox"/> Art work | <input type="checkbox"/> Blog | <input type="checkbox"/> Podcast |
| <input type="checkbox"/> Photograph | <input type="checkbox"/> Wiki | <input type="checkbox"/> Poem |
| <input type="checkbox"/> Video or digital story | <input type="checkbox"/> School project | <input type="checkbox"/> Other (please describe) |

(Please tick)

Entitled: _____
Produced by me or of
me on or about: _____
(Insert date)

STUDENT IDENTIFICATION AND PRIVACY

If published, reproduced and communicated I understand that for privacy purposes my work will be identified using the title of the **work, my first name only, my year level and school**. No other personal information will be published although I accept that that my identity may nevertheless be apparent by association to a number of people.

If my work identifies a living person other than myself, I have advised my teacher/the VAGTC how to contact that person to obtain their consent for my work to be published.

INTELLECTUAL PROPERTY AND COPYRIGHT

I understand that I hold the intellectual property rights but grant the Victorian Association for Gifted and Talented Children license to use them at no cost.

With reference to the above material, I grant permission to the Victorian Association for Gifted and Talented Children to use, reproduce, distribute, communicate to the public, publish, publicly perform, publicly display, modify, adapt, translate, upload, download in any form or manner, and incorporate this material into other materials or works in any format or medium for any noncommercial purpose and the right to sublicense those rights. This consent is for an indefinite period of time.

I understand that I can withdraw my consent at any time but I must do so in writing and forward it to the Communications Division, Victorian Association for Gifted and Talented Children, 3/15 Wellington Street, Kew VIC 3101.

Student name (print)

Parent/Legal guardian name (print)

Age

Year level

Parent signature

Parent signature

Date

Date